


<b>ORDER FOR SUPPLIES OR SERVICES</b> (Contractor must submit four copies of invoice.)						Form Approved OMB No. 0704-0187 Expires Jun 30, 1997		PAGE 1 OF <b>4</b>			
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.											
<b>PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.</b> <b>SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.</b>											
1. CONTRACT/PURCH ORDER NO. <b>SP0900-02-D-7018</b>			2. DELIVERY ORDER NO. <b>0005</b>		3. DATE OF ORDER (YYMMDD) <b>2003 OCT 14</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPE03279001402</b>		5. PRIORITY <b>DOA7</b>		
6. ISSUED BY CODE <b>SP0900</b> <b>Defense Supply Center Columbus</b> <b>3990 E.Broad St.</b> <b>P.O. Box 16704</b> <b>Columbus,OH 43216-5010</b> <b>Local Administrator: PCCCLKH (614)692-4121 / FAX: (614)692-4230</b> <b>E-mail: Shaunna.McClintock@dla.mil</b>				7. ADMINISTERED BY (If other than 6) CODE <b>S3309A</b> <b>CMDR DCMC LONG ISLAND</b> <b>605 STEWART AVE</b> <b>GARDEN CITY LI NY 11530-4761</b> <b>CRITICALITY: B</b>				8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR CODE <b>59926</b>  <b>NAME AND ADDRESS</b> <b>RODELCO ELECTRONICS CORP</b> <b>111 HAYNES CT</b> <b>RONKONKOMA NY 11779-7221</b>				FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>210 DAYS ARO</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED			
						12. DISCOUNT TERMS <b>NET 30 days</b>		13. MAIL INVOICES TO <b>See Block 15</b>			
14. SHIP TO CODE <b>See Schedule - Do Not Ship to Address in Block 6</b>				15. PAYMENT WILL BE MADE BY CODE <b>S33184</b> <b>DFAS - COLUMBUS CENTER</b> <b>ATTN DFAS BVDPC/CC</b> <b>3990 E BROAD ST PO BOX 182317</b> <b>COLUMBUS OH 43218-6205</b> <b>EFT: T</b>				MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER			
16. TYPE OF ORDER DELIVERY <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/> This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your _____ and furnish the following on terms specified herein. <b>ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</b>											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  <b>EG: 97X4930 5CE0 001 26.0 S33150</b>											
18. ITEM NO.      19. SCHEDULE OF SUPPLIES/SERVICE      20. QUANTITY ORDERED/ACCEPTED*      21. UNIT      22. UNIT PRICE      23. AMOUNT											
				<b>Remarks:</b> <b>ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>		<b>TOTAL:</b> <b>51</b>					
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA <b>Joseph Smith</b> <b>PCCCLHL</b> BY:  <b>3/ORDERING OFFICER</b>				25. TOTAL <b>\$ 314670.00</b>			
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____				30. INITIALS		31. PAYMENT <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY			
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____				33. AMOUNT VERIFIED CORRECT FOR		34. CHECK NUMBER		35. BILL OF LADING NO.			
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER			
								42. S/R VOUCHER NO.			

CONTINUATION SHEET	Order Number: SP0900-02-D-7018-0005	PAGE 2	OF PAGES 4
<p>TERMS AND CONDITIONS OF BASIC CONTRACT ARE APPLICABLE.</p>			

## CONTINUATION SHEET

Order Number:

SP0900-02-D-7018-0005

PAGE OF PAGES

3

4

## SECTION B

PR YPE03279001402  
NSN 5865-01-178-2735

## ITEM DESCRIPTION:

## MODULATOR

DLAD 52.246-9004, PRODUCT VERIFICATION TESTING,  
APPLIES. THIS CLAUSE IS A GOVERNMENT OPTION  
THAT CAN ONLY BE INVOKED UPON THE COGNIZANT  
CONTRACT ADMINISTRATION OFFICE NOTIFYING THE  
CONTRACTOR THAT PVT SAMPLES ARE TO BE SELECTED.

## CRITICAL APPLICATION ITEM

GENERAL MICROWAVE CORPORATION A	(11332)	P/N	1568A-2
ITT AVIONICS	(28527)	P/N	2622568G002
RODELCO ELECTRONICS CORP	(59926)	P/N	2622568G002

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPE03279001402	0001	51	EA	\$6170.00000	\$314670.00

QTY VARIANCE: PLUS 0% MINUS 0%  
INSPECTION POINT: ORIGIN  
ACCEPTANCE POINT: ORIGIN

## PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999  
QUP = 001: PRES MTHD = 41: CLNG/DRY = 1: PRESV MAT = 00:  
WRAP MAT = 00: CUSH/DUNN MAT = NA: CUSH/DUNN THKNESS = X:  
UNIT CONT = D3: OPI = 0:  
INTRMDTE CONT = DO: INTRMDTE CONT QTY = AAA:  
PACK CODE = U:  
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.  
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH  
MIL-STD-129 (LATEST REVISION) MARKING AND BAR  
CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: DESTINATION BY: 2004 MAY 11

PARCEL POST/FREIGHT ADDRESS:

CONTINUED ON NEXT PAGE

SECTION B

SW3119  
DEF DIST DEPOT WARNER ROBINS  
455 BYRON STREET BLDG 376  
ROBINS AFB GA 31098-1887

NON-MILSTRIP  
PROJ

\* \* \* \* \*

REMIT PAYMENT TO:

\* \* \* \* \*